

STATE OF CALIFORNIA
DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF OCCUPATIONAL SAFETY & HEALTH

CERTIFICATION OF A REPEAT VIOLATION

As Custodian of Records of the _____
District Office, I certify that the attached document(s) contain:

A true and correct copy of the Division's original official citation of a
violation issued to

_____ on _____
(Employer) (Date)

A true and correct copy of the Division's original official Declaration Proof of
Service to

_____ on _____
(Employer) (Date)

Proof of abatement of previous citation(s) of violation:

A true and correct copy of the citation indicating the violation was abated at the
time of the original inspection (Cal/OSHA 2).

A true and correct copy of the Employer's Signed Statement of Abatement of
Regulatory/General Violations (Cal/OSHA 160) and/or the Employer's Signed
Statement of Abatement of Serious Violations (Cal/OSHA 161).

A true and correct copy of the Division's Follow-up Inspection Report.

As Custodian of Records of the _____
District Office, I certify that the previous citation(s) of violation has become a final order of the
Appeals Board in that:

The Employer's appeal(s) was/were denied - a copy of the Decision is attached.

The citation(s) was/were never appealed.

I declare under penalty of perjury that the foregoing is true and correct.

Date _____ at _____, California.

(Signed Name)

Custodian of Records (Print Name and Title)